



HIV IN MARYLAND

MARYLAND HIV PLANNING GROUP APRIL 2, 2015

Colin Flynn, Chief
HIV Surveillance, Epidemiology and Evaluation

Maryland Department of Health and Mental Hygiene Prevention and Health Promotion Administration



MISSION AND VISION



MISSION

• The mission of the Prevention and Health Promotion Administration is to protect, promote and improve the health and well-being of all Marylanders and their families through provision of public health leadership and through community-based public health efforts in partnership with local health departments, providers, community based organizations, and public and private sector agencies, giving special attention to at-risk and vulnerable populations.

VISION

 The Prevention and Health Promotion Administration envisions a future in which all Marylanders and their families enjoy optimal health and well-being.



U.S. Prevalence





Volume 19, Number 3 =

Monitoring Selected National
HIV Prevention and Care Objectives
by Using HIV Surveillance Data—
United States and
6 Dependent Areas—2012

 CDC estimated 1,201,100 adults/ adolescents were living with HIV at the end of 2011

 14.0% were undiagnosed

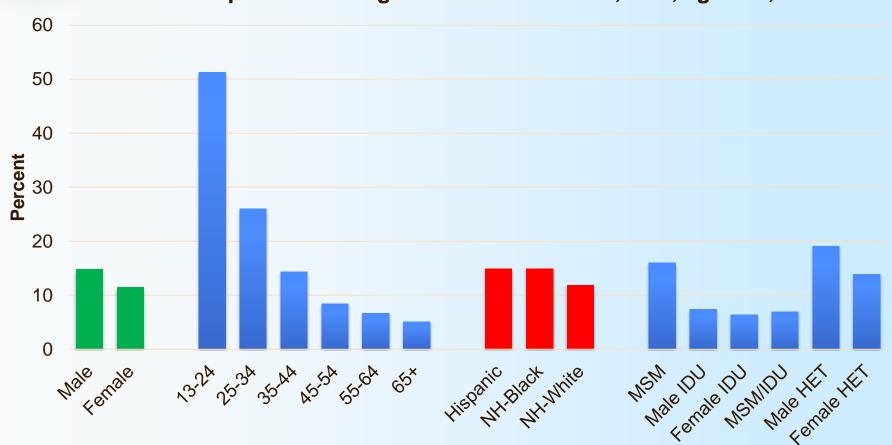




Undiagnosed Infections



Estimated percent undiagnosed HIV infections, U.S., age 13+, 2011





Populations with Changes in HIV Incidence



- Overall national incidence estimate is unchanged from 2008-2010 (~50K)
- 21% decrease among females
- 12% increase among MSM
- 22% increase among 13-24 year old MSM



Volume 17, Number 4 =

Estimated HIV Incidence in the United States, 2007–2010





HIV Diagnoses during 2013 Ranked by Estimated Rates



	Reported	Estimated	Estimated Rate
STATE/TERRITORY	<u>Cases</u>	<u>Cases</u>	per 100,000
 District of Columbia 	486	612	94.6
2. Maryland	1,401	2,174	36.7
3. Louisiana	1,357	1,399	30.3
4. Georgia	1,877	3,020	30.2
5. Virgin Islands	23	29	28.0
6. Florida	5,200	5,377	27.5
7. New Jersey	1,392	2,177	24.5
8. Puerto Rico	607	761	21.1
9. New York	3,583	3,803	19.4
10. Texas	4,306	4,854	18.4
United States	42,018	48,145	15.0

CDC. HIV Surveillance Report, 2013. Vol. 25. Table 18.



HIV Diagnoses during 2013 Ranked by Estimated Rates



	<u>Estimated</u>		<u>nated</u>
	Reported	d	Rate per
METROPOLITAN AREA	<u>Cases</u>	<u>Cases</u>	<u>100,000</u>
1. Miami-Fort Lauderdale-West Palm Beach, FL	2,502	2,582	44.3
2. New Orleans-Metairie, LA	521	538	43.4
3. Baltimore-Columbia-Towson, MD	650	1,010	36.5
4. Baton Rouge, LA	288	297	36.2
5. Atlanta-Sandy Springs-Roswell, GA	1,214	1,919	34.7
6. Washington-Arlington-Alexandria, DC-VA-MD-WV	1,482	1,995	33.5
7. Memphis, TN-MS-AR	393	413	30.8
8. Jackson, MS	164	170	29.5
9. Jacksonville, FL	361	373	26.8
10. Orlando-Kissimmee-Sanford, FL	584	604	26.6
22. Philadelphia-Camden-Wilmington, PA-NJ-DE-MD	1,098	1,225	20.3
United States*	41,994	48,114	15.0

^{* 50} states, DC, and Puerto Rico, only. CDC. HIV Surveillance Report, 2013. Vol. 25. Table 22.



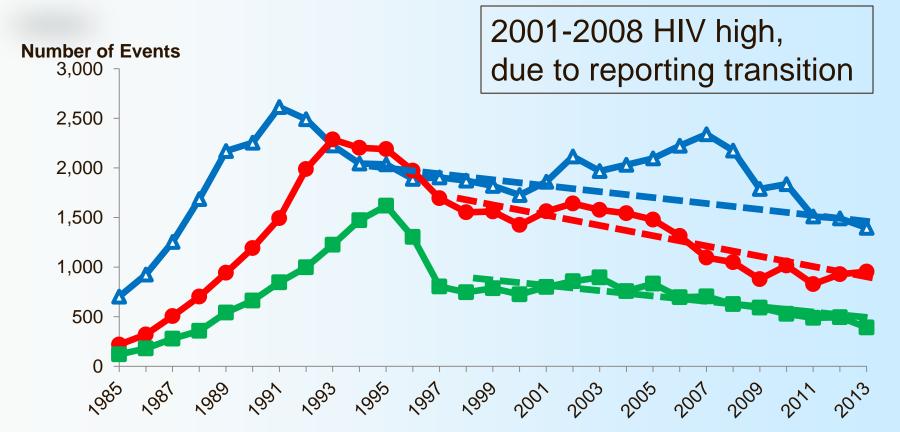


Maryland Epidemiological Data



Maryland Adult/Adolescent HIV Trends



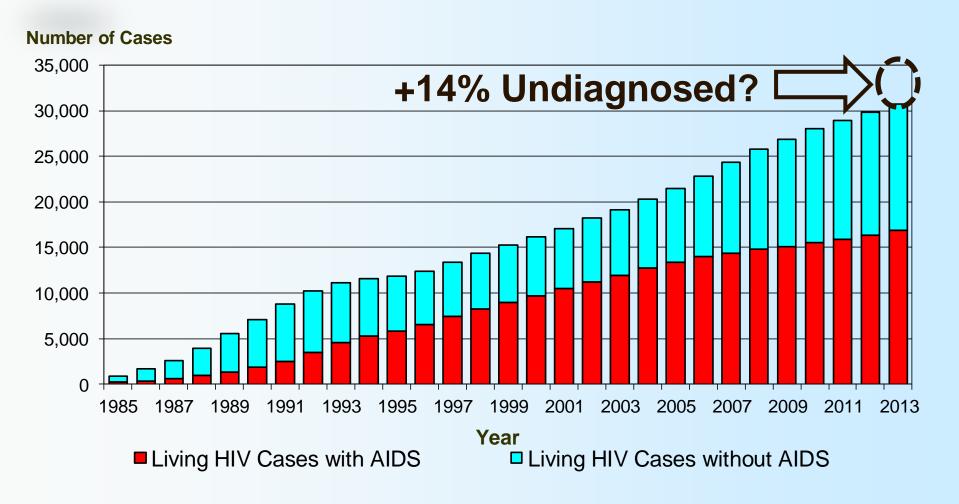


Year of Diagnosis or Death



Maryland Adult/Adolescent Living HIV Cases







Maryland Adult/Adolescent **HIV Statistics**



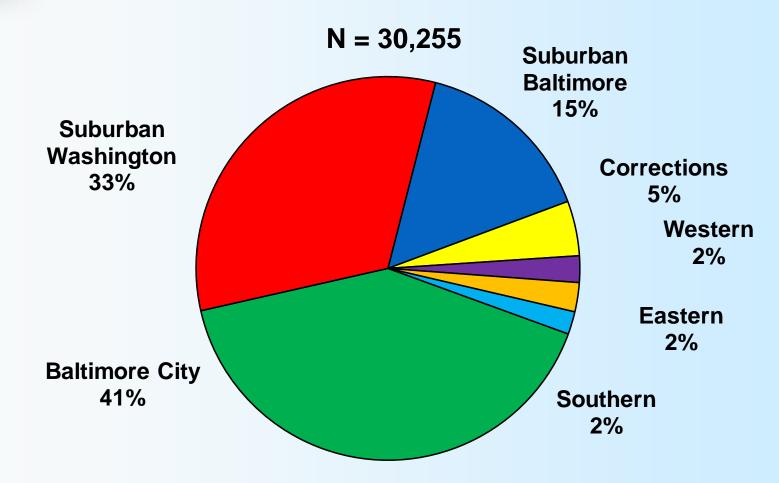
No.	per 100,000	
1,394	28.1	
945	19.0	
NIa		
INO.		
388		
No.	per 100,000	1 in X
13,595	273.9	
16,660	335.6	
30,255	609.5	164
	1,394 945 No. 388 No. 13,595 16,660	1,394 28.1 945 19.0 No. 388 No. per 100,000 13,595 273.9 16,660 335.6

Departed Diagrapase (during 2012)



Maryland Adult/Adolescent Living HIV Cases by Region, 12/31/13

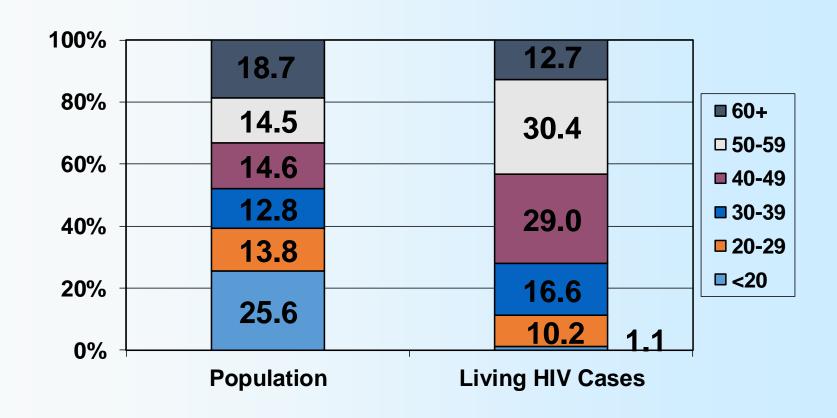






Maryland Population and Living HIV Cases by Age

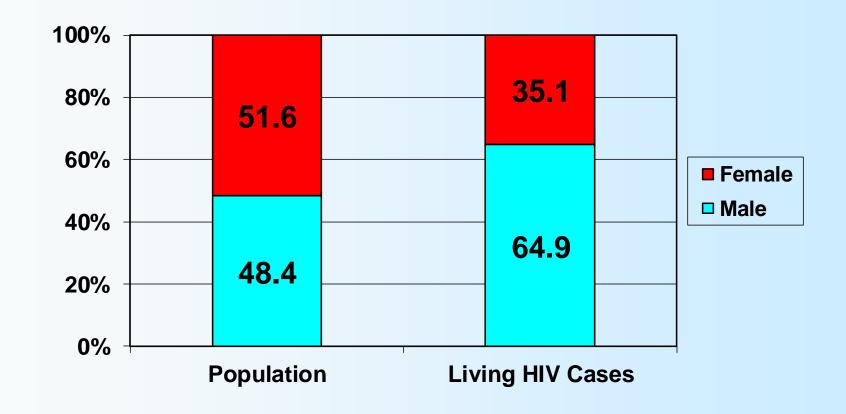






Maryland Adult/Adolescent Population and Living HIV Cases by Sex at Birth

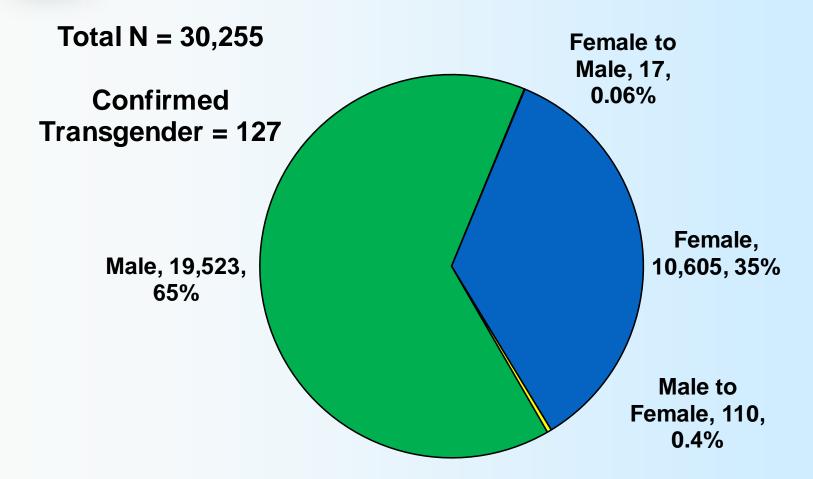






Maryland Adult/Adolescent Living HIV Cases by Gender, 12/31/13

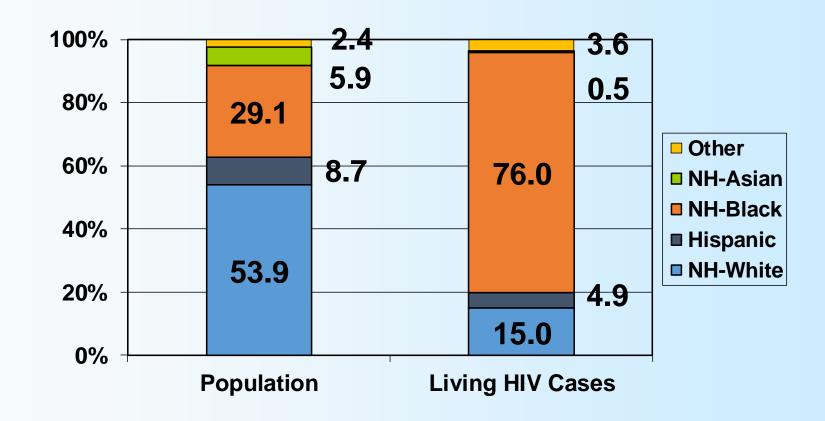






Maryland Adult/Adolescent Population and Living HIV Cases by Race/Ethnicity

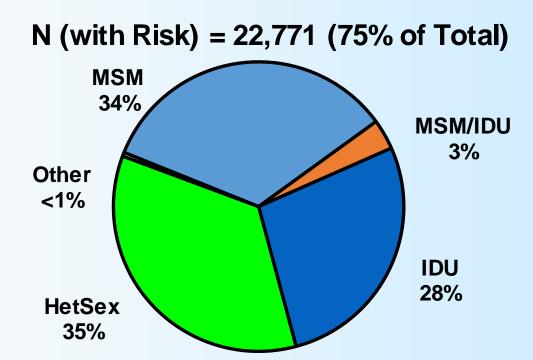






Maryland Adult/Adolescent Living HIV Cases 12/31/13 by Exposure Category

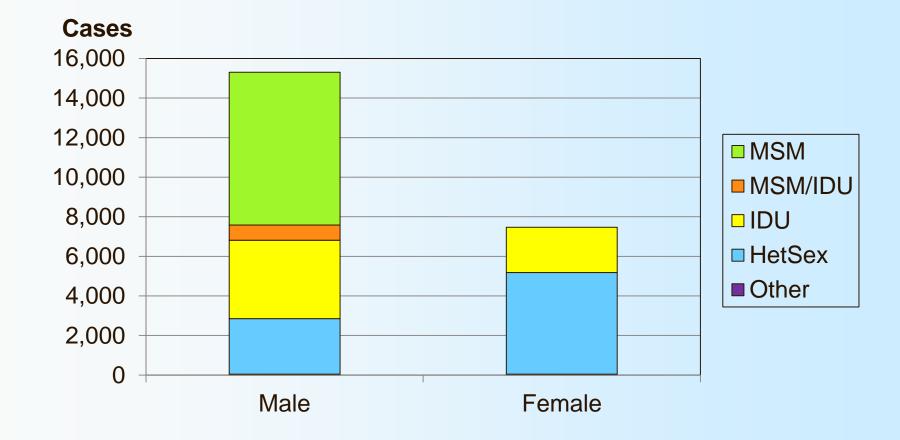






Maryland Adult/Adolescent Living HIV Cases 12/31/13 by Exposure Category and Sex at Birth

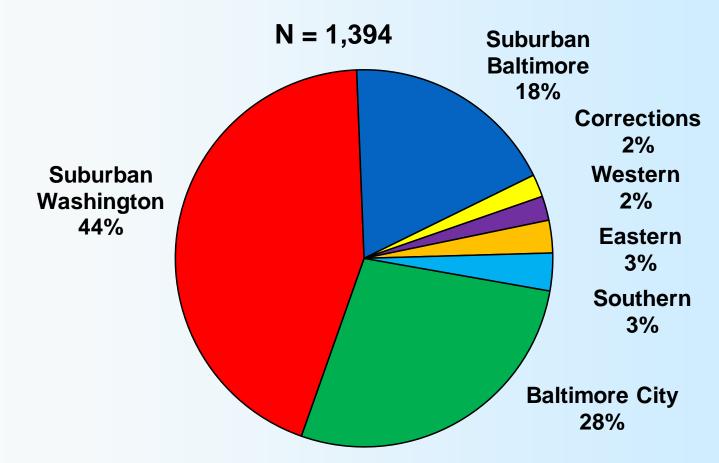






Maryland Adult/Adolescent 2013 HIV Diagnoses by Region

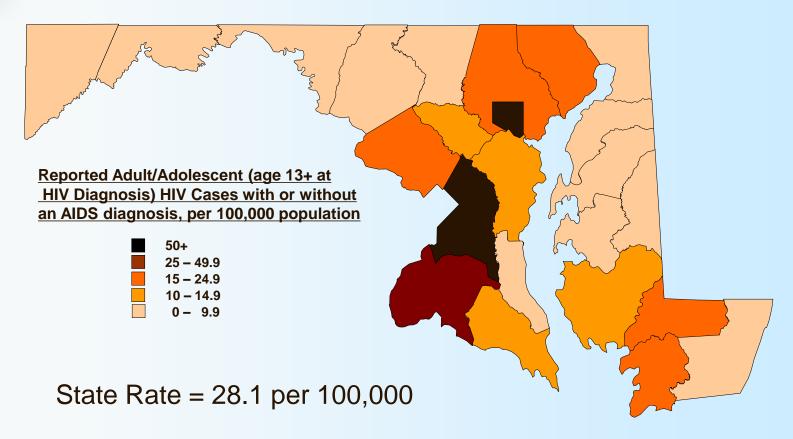






Maryland Adult/Adolescent 2013 HIV Diagnosis Rates by Jurisdiction







Maryland Adult/Adolescent 2013 HIV Diagnoses (N=1,394)



- Linkage to Care: 81% had a CD4 or VL test within 3 months of HIV diagnosis
- CD4 at Diagnosis: 82% had a CD4 test within 12 months of HIV diagnosis, and the median value was 335 cells/microliter
- Late HIV Diagnosis: 32% had an AIDS diagnosis within 12 months of their HIV diagnosis



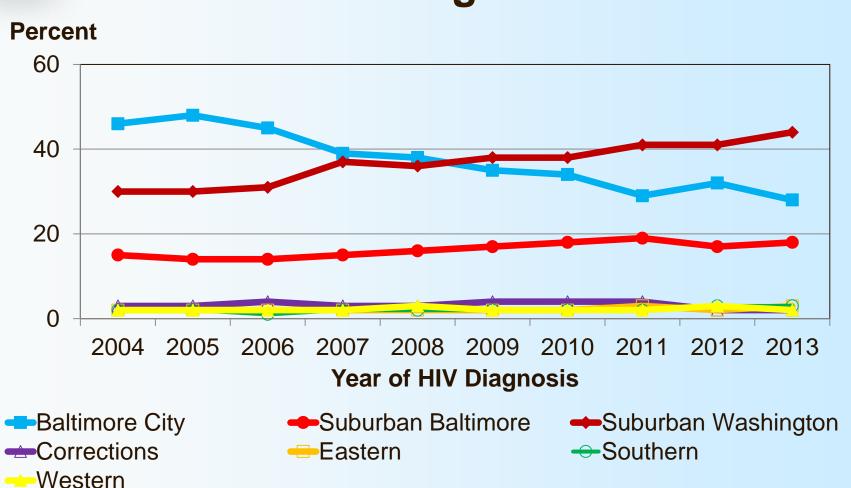


Epidemiological Trends



Maryland Adult/Adolescent HIV Diagnosis Trends by Region

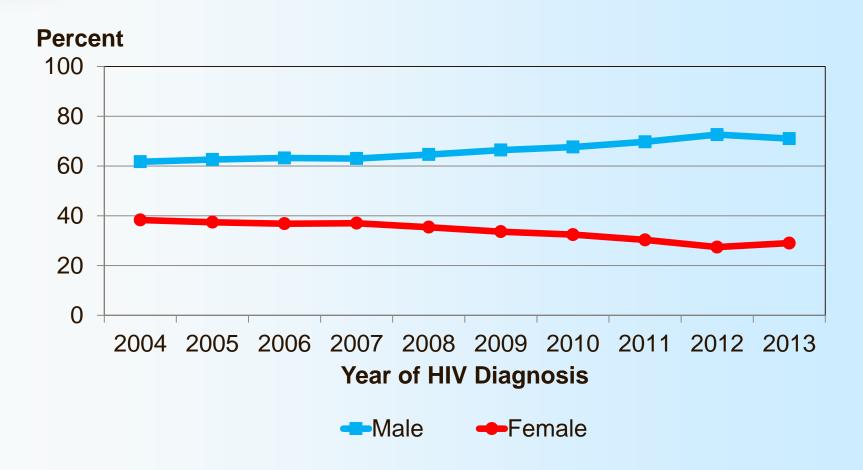






Maryland Adult/Adolescent HIV Diagnosis Trends by Sex at Birth

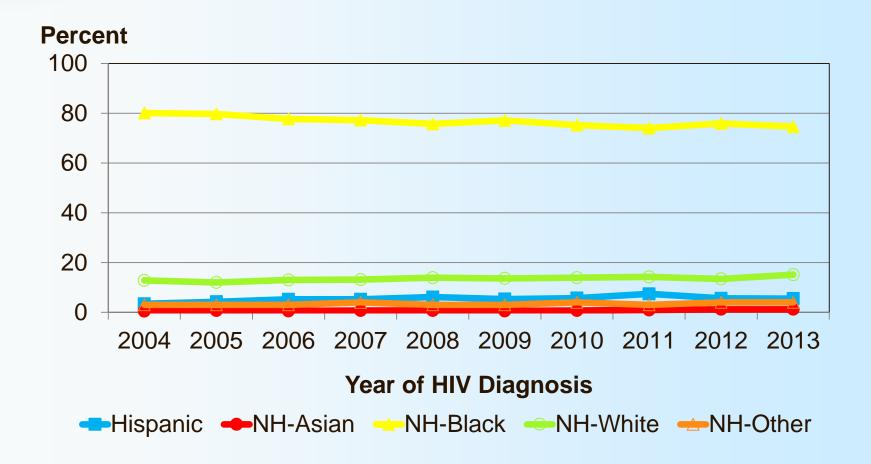






Maryland Adult/Adolescent HIV Diagnosis Trends by Race/Ethnicity

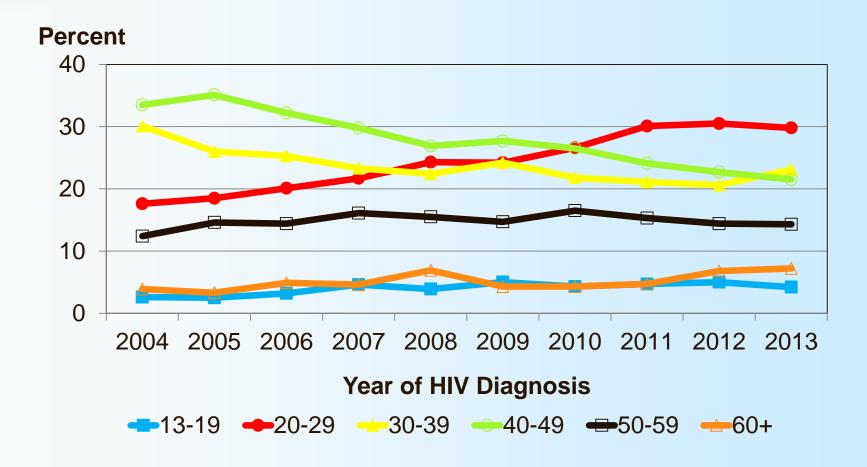






Maryland Adult/Adolescent HIV Diagnosis Trends by Age at Diagnosis

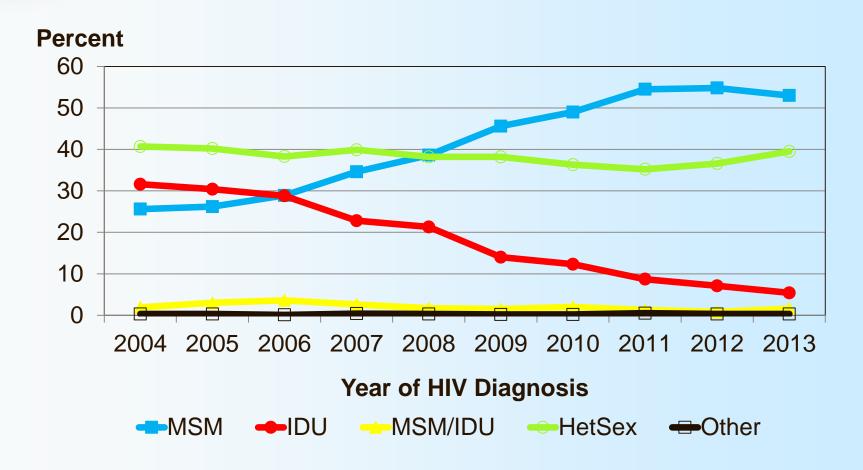






Maryland Adult/Adolescent HIV Diagnosis Trends by Exposure Category







Leading HIV Exposure Category in Maryland



Year of HIV Diagnosis	Number of Years	Most Common HIV Exposure Category
1981-1987	7	MSM
1988-2003	16	IDU
2004-2007	4	HET
2008-2014	7	MSM





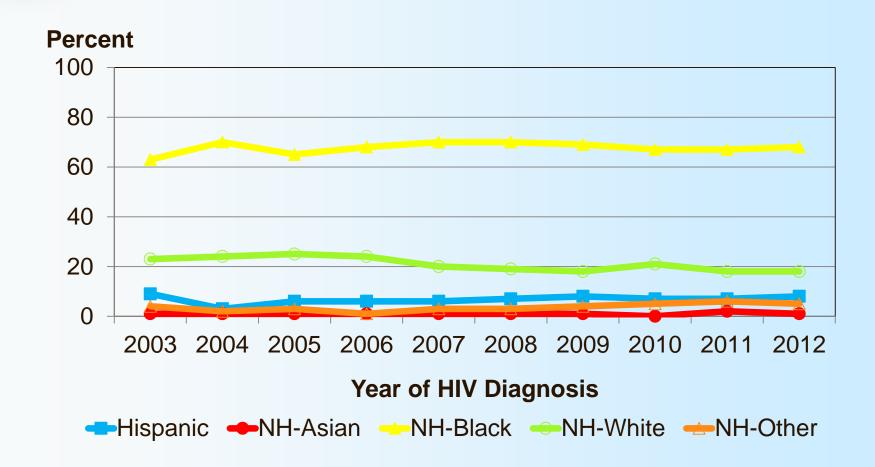
Maryland Reported HIV Diagnosis Trends

MSM Exposure



Maryland Adult/Adolescent MSM HIV Diagnosis Trends by Race/Ethnicity

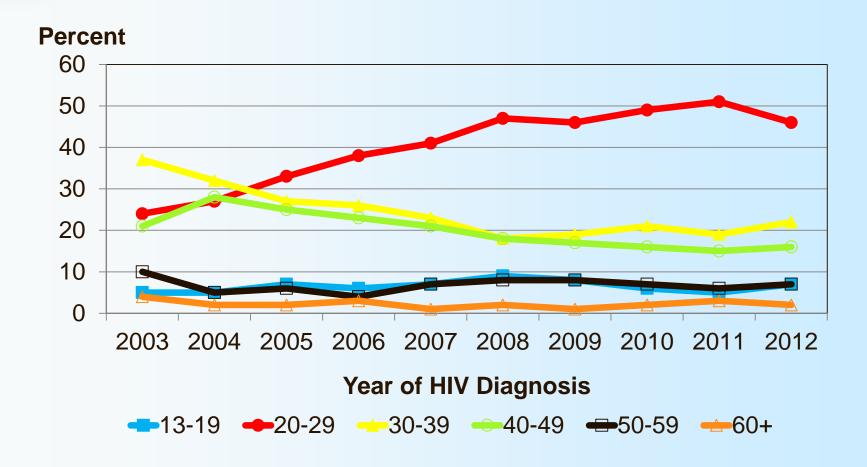






Maryland Adult/Adolescent MSM HIV Diagnosis Trends by Age at Diagnosis







Behavioral Surveillance MSM Overview



	Wave 1 June 2004 – Apr 2005	Wave 2 Aug – Nov 2008	Wave 3 Aug – Dec 2011
Data collection method	Venue – based	Venue – based	Venue – based
Total recruited*	645	448	403
HIV prevalence	37.7%	37.5%	42.4%
Unrecognized infection	58.4%	78.4%	67.3%

Wave 4 recruitment completed in December





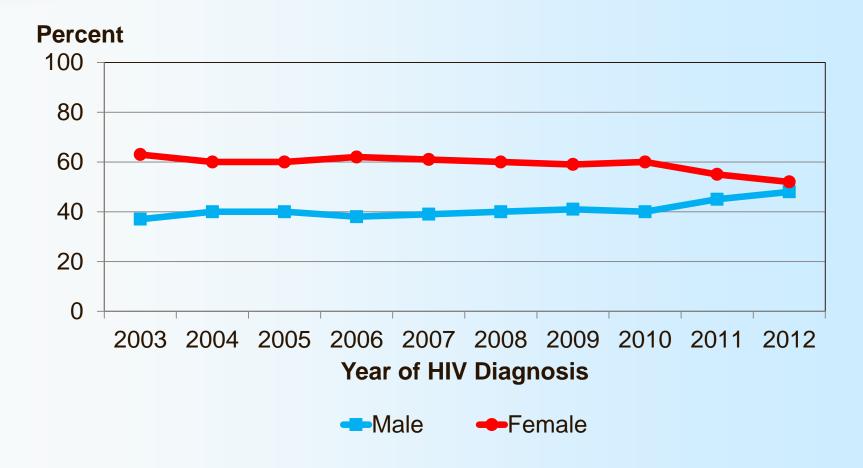
Maryland Reported HIV Diagnosis Trends

Heterosexual Exposure



Maryland Adult/Adolescent Heterosexual HIV Diagnosis Trends by Sex at Birth

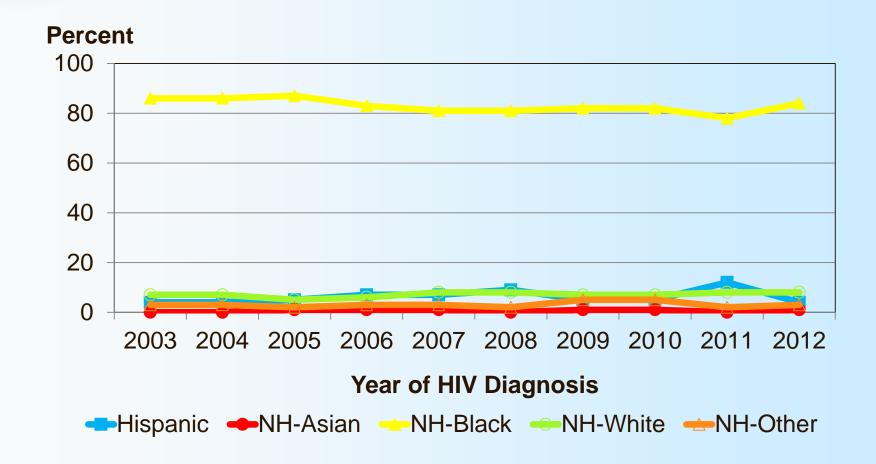






Maryland Adult/Adolescent Heterosexual HIV Diagnosis Trends by Race/ Ethnicity

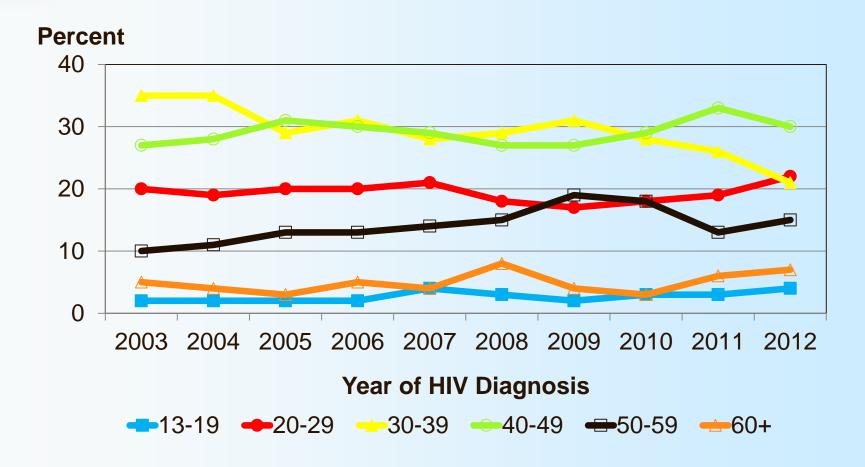






Maryland Adult/Adolescent Heterosexual HIV Diagnosis Trends by Age at Diagnosis









Behavioral Surveillance HET Overview



	Wave 1 July – Oct 2007	Wave 2 Sept – Dec 2010	Wave 3 Sept – Dec 2013
Data collection method	Venue – based	Respondent Driven	Respondent Driven
Total recruited*	332	338	428
HIV prevalence	3.9%	6.3%	6.6%
Unrecognized infection	83.3%	62.5%	35.3%





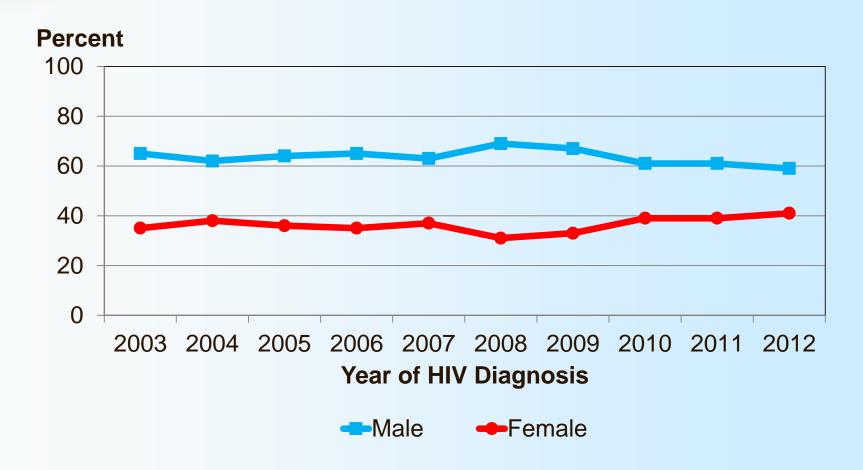
Maryland Reported HIV Diagnosis Trends

IDU Exposure



Maryland Adult/Adolescent IDU HIV Diagnosis Trends by Sex at Birth

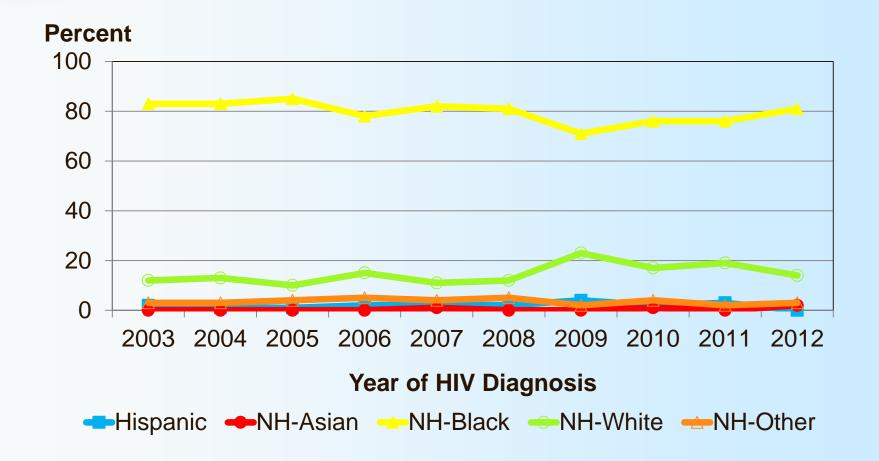






Maryland Adult/Adolescent IDU HIV Diagnosis Trends by Race/ Ethnicity

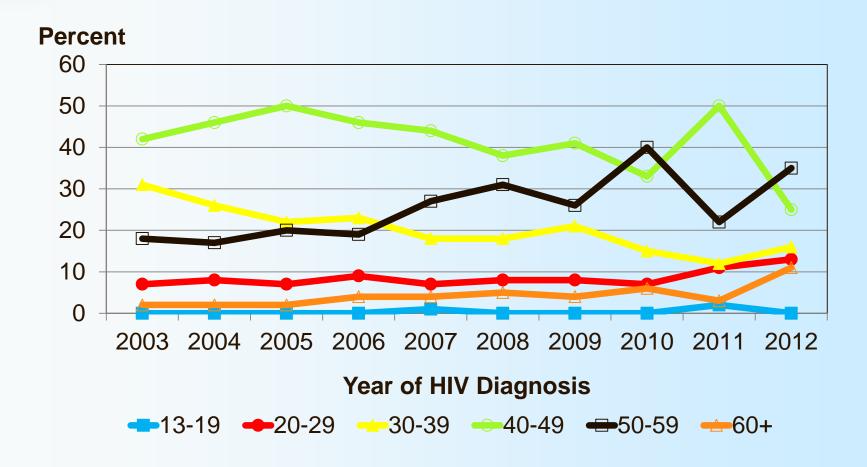






Maryland Adult/Adolescent IDU HIV Diagnosis Trends by Age at Diagnosis







Behavioral Surveillance IDU Overview



	Wave 1 Aug 2006 – Jan 2007	Wave 2 Sept – Dec 2009	Wave 3 Aug – Dec 2012
Data collection method	Respondent Driven	Respondent Driven	Respondent Driven
Total recruited*	539	507	620
HIV prevalence	11.9%	16.2%	23.2%
Unrecognized infection	50%	48%	27.8%

Wave 4 recruitment to begin this summer



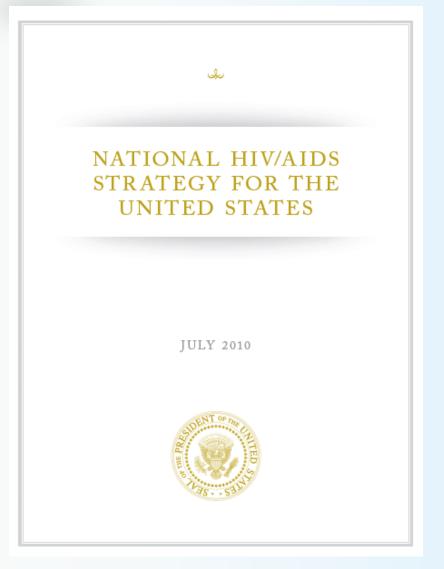


Moving Forward



NHAS 2010





- Reducing new HIV infections
- Increasing access to care and improving health outcomes for people living with HIV
- Reducing HIV-related disparities and health inequities



NHAS Goal 1 Reducing Incidence



- By 2015, lower the annual number of new HIV infections by 25%
 - Reduce the HIV transmission rate by 30%
 - Increase from 79% to 90% the percentage of people living with HIV who know their status



NHAS Goal 1 Progress Maryland Data

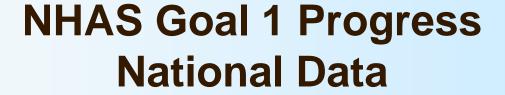




Year of HIV Diagnosis

Transmission Rate per 100







Reduce Percent Undiagnosed to 10% by 2015



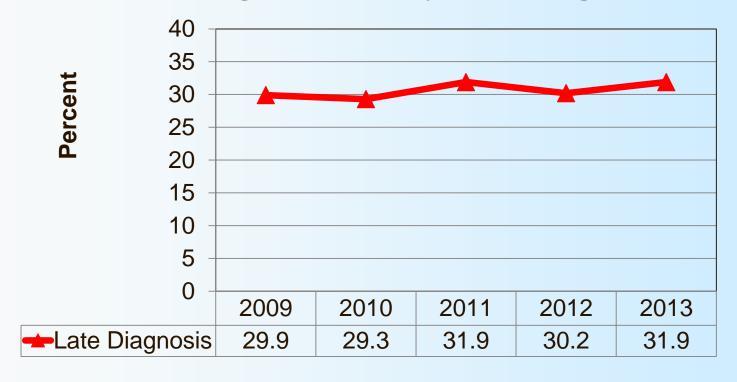
Year of HIV Diagnosis







Late Diagnosis – Proxy for Undiagnosed



Year of HIV Diagnosis



NHAS Goal 2 Increasing Access



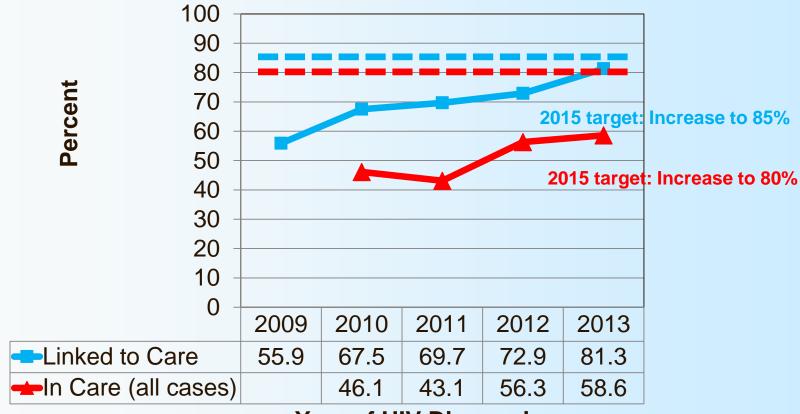
By 2015:

- Increase the proportion of newly diagnosed patients linked to clinical care within three months of their HIV diagnosis from 65 percent to 85 percent
- Increase the proportion of Ryan White HIV/AIDS Program clients who are in continuous care (at least 2 visits for routine HIV medical care in 12 months at least 3 months apart) from 73 percent to 80









Year of HIV Diagnosis



NHAS Goal 3 Reducing Disparities



By 2015:

- Increase the proportion of HIV diagnosed gay and bisexual men with undetectable viral load by 20 percent.
- Increase the proportion of HIV diagnosed Blacks with undetectable viral load by 20 percent.
- Increase the proportion of HIV diagnosed Latinos with undetectable viral load by 20 percent.



NHAS Goal 3 Progress Maryland Data



Percent PLWH with Viral Suppression (<400 c/ml)



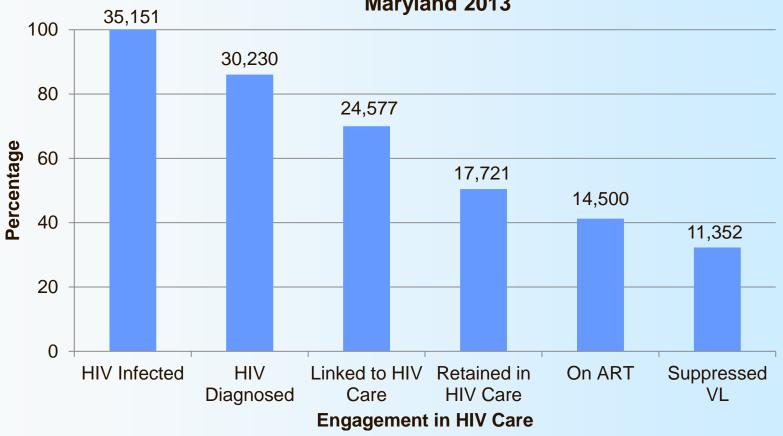
Year and Quarter



Continuum of Care



Estimated number and percentage of HIV infected adults/ adolescents engaged in selected stages of the continuum of care, Maryland 2013

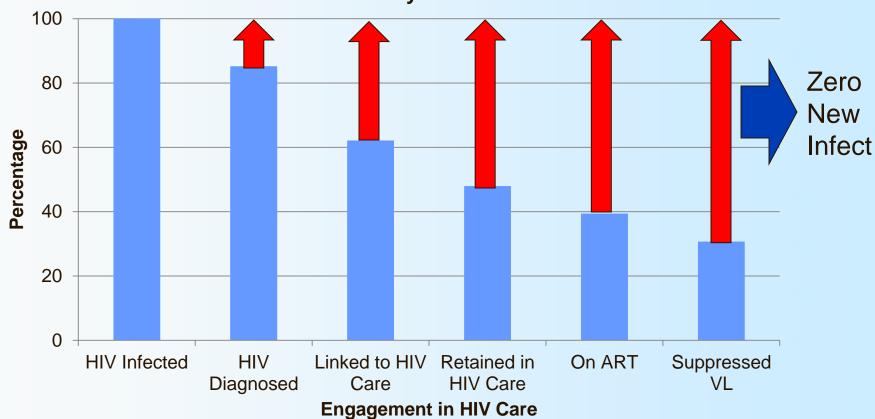




Continuum of Care



Estimated number and percentage of HIV infected adults/ adolescents engaged in selected stages of the continuum of care, Maryland 2013

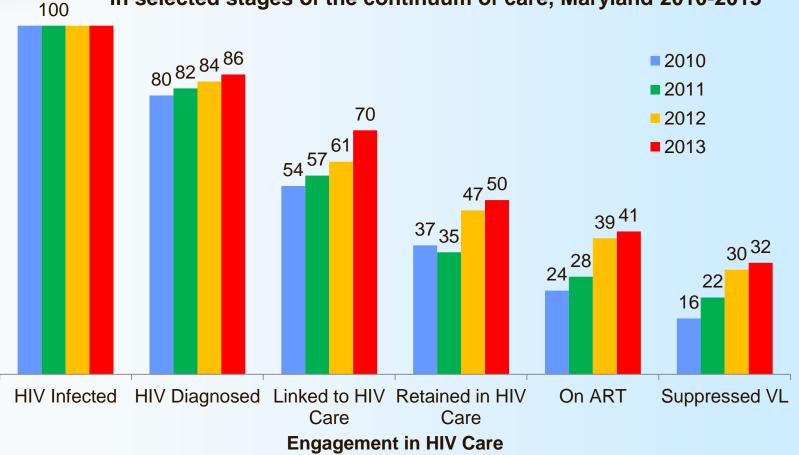




Improvements in the Continuum of Care



Estimated percentage of HIV infected adults/adolescents engaged in selected stages of the continuum of care, Maryland 2010-2013







Prevention and Health Promotion Administration

http://phpa.dhmh.maryland.gov/oideor/chse